

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000029552

**FILED**  
**Apr 02, 2013**  
**Secretary of State**

**Entity Name:** SOUTHERN WAKESKATES LLC

**Current Principal Place of Business:**

955 EGRET CIRCLE  
B102  
DELRAY BEACH, FL 33444 US

**New Principal Place of Business:**

**Current Mailing Address:**

955 EGRET CIRCLE  
B102  
DELRAY BEACH, FL 33444 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KERKHOVEN, EDWIN  
955 EGRET CIRCLE  
B102  
DELRAY BEACH, FL 33444 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDWIN KERKHOVEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KERKHOVEN, EDWIN  
Address: 955 EGRET CIRCLE, B102  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: MGRM  
Name: JOHN, JARRED  
Address: 955 EGRET CIRCLE, B102  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: MGRM  
Name: ROBINS, DANIEL  
Address: 955 EGRET CIRCLE, B102  
City-St-Zip: DELRAY BEACH, FL 33444 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EDWIN KERKHOVEN

MR

04/02/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date